## FEC FORM 3X 1. NAME OF COMMITTEE (in

01 23

03

00132574

Office

Use

Only

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

FEC MAIL CENTER

2017 JAN 23 AM 7: 32

**FEC FORM 3X** 

Rev. 05/2016

Example: If typing, type TYPE OR PRINT ▼ 12FE4M5 COMMITTEE (in full) over the lines. This Is A Super PAC 19 N 7th St ADDRESS (number and street) Check if different than previously 17837 reported. (ACC) Lewisburg FEC IDENTIFICATION NUMBER ▼ CITY A STATE A ZIP CODE A 3. IS THIS **AMENDED** NEW 00607135 X OR REPORT (N) (A) TYPE OF REPORT (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Jun 20 (M6) Dec 20 (M12) Mar 20 (M3) Sep 20 (M9) (Non-Electi Year Only) (a) Quarterly Reports: Apr 20 (M4) Jan 31 (YE) Jul 20 (M7) Oct 20 (M10) April 15 Quarterly Report (Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report (Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year (d) 30-Day Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report in the (TER) Election on State of 01 01 2016 Covering Period 2016 through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer **Lindsay Nielson** Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

	SUMN	ИARY	PAGE	٠.
OF	RECEIPTS	AND DI	SBURSE	MENTS

FEC Form 3X (Rev. 05/2016)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name	The second of th	
This Is A Super PAC	·	A Commence of the second
Report Covering the Period: From:	01 01 2016 To	o: 12 / 31 / 2016
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand  January 1,  2016	· · · · · · · · · · · · · · · · · · ·	0.00
(b) Cash on Hand at  Beginning of Reporting Period	0.00	
(c) Total Receipts (from Line 19)	0.00	0,.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	0_00	0,00
7. Total Disbursements (from Line 31)	0_00	0,00
Cash on Hand at Close of     Reporting Period     (subtract Line 7 from Line 6(d))	0_00	0,,00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	000	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0_00	
This committee has qualified as a mu	ulticandidate committee. (see FEC FORM 1M)	
	For further information contact:	<del></del>
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530 Local 202-694-1100	

P			$\sim$ 111			PAGE
1111	ιди	-11	<b>~</b> 111	лпло	M.V	PALE

FEC Form 3X (Rev. 05/2016)	of Receipts	Page 3
Write or Type Committee Name		
This Is A Super PAC		the state of the s
Report Covering the Period: From:	' 01 / 2016 то:	12 31 2016
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:     (a) Individuals/Persons Other		
(a) Individuals/Persons Other  Than Political Committees		
(i) Itemized (use Schedule A)	0 00	0 00
Î		
(ii) Unitemized	0 00	0 00
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	0_00	0 00
(b) Political Party Committees	0 00	0_00
(c) Other Political Committees	0 00	0.00
(such as PACs)		0.00
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	0 00	0_00
2. Transfers From Affiliated/Other	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
Party Committees	0 00	0,00
3. All Loans Received	0_00	0_00
4. Loan Repayments Received	0_00	0 00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0 00	0 00
6. Refunds of Contributions Made		0_00
to Federal Candidates and Other		
Political Committees	0 00	0_00
7. Other Federal Receipts · (Dividends, Interest, etc.)	0 00	.0 00
B. Transfers from Non-Federal and Levin Funds		000
(a) Non-Federal Account		
(from Schedule H3)	0_00	, , , , , , , , , , , , , , , , , , , ,
(h) Luda Sunda (f. 11 Substitution   F	0 00	A AA
(b) Levin Funds (from Schedule H5)	73 1 1 2 1 1 2 1	0_00
(c) Total Transfers (add 18(a) and 18(b))	0 00-	0 00
	and the first of the second of	
9. Total Receipts (add Lines 11(d),		·
12, 13, 14, 15, 16, 17, and 18(c))▶	Ó 00	0.00
O. Total Faderal Passists		
0. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	0 00	0 00
(Sandade Line 19(9) north Line 197 minus		<u></u>

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:  (a) Allocated Federal/Non-Federal  Activity (from Schedule H4)	Total Tills Teriod	Calendar Teal-to-Date
	(i) Federal Share	0_00	0_00
	(ii) Non-Federal Share	0 00	0,00
	(b) Other Federal Operating Expenditures	0 00	0 00
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b))▶	0_00	0_00
22.	Transfers to Affiliated/Other Party Committees	0 00	0,00
23.	Contributions to Federal Candidates/Committees		
24	and Other Political Committees	0 00	0,00
	(use Schedule E)	0 00	0_00
25.	(52 U.S.C. § 30116(d)) (use Schedule F)	0 00	0, 0,0
26.	Loan Repayments Made	0 00	0,00
<b>~</b>	Lana Mada		
27. 28.	Loans Made  Refunds of Contributions To:  (a) Individuals/Persons Other	0,00	0.00
	Than Political Committees	, , , , , , , , , , , , , , , , , , , ,	000
	(b) Political Party Committees	0_00	0_00
	(c) Other Political Committees (such as PACs)	0 00	0 00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))	0_00	0, 00
29.	Other Disbursements (Including		<del></del>
	Non-Federal Donations)	0 00	0,00
30.	Federal Election Activity (52 U.S.C. § 30101(20 (a) Allocated Federal Election Activity (from Schedule H6)	)))	
	(i) Federal Share	0,00	0 00
	(ii) "Levin" Share		
	(b) Federal Election Activity Paid	0 00	0 00
	Entirely With Federal Funds	0_00	0_00
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0_00	0 00
.31	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0 00	0 00
32.	Total Federal Disbursements		
•	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)		<del></del>
		0 00	0 00

## **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 05/2016)

of Disbursements

. Page **5** 

_	III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
33.	Total Contributions (other than loans) (from Line 11(d), page 3)	0 00	0_00	
34.	Total Contribution Refunds (from Line 28(d))	0,00	0, 00	
<b>35</b> .	Net Contributions (other than loans) (subtract Line 34 from Line 33)	0 00	0, 00	
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0 00	0_00	
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0 00	0 00	
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0 00	0, 00	

SCHEDULE A (FEC Form 3X)	Lico congreto cohodulo(a)	FOR LINE NUMBER: PAGE 1 OF. 1		
ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)		
	Detailed Summary Page	11a 11b 11c 12		
Air is a second to the second	11	13   14   15   16   17		
Any information copied from such Reports and Stateme or for commercial purposes, other than using the name	and address of any political committee	to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)		<del></del>		
This Is A Super PAC		. ,		
<u>/</u>				
Full Name of Individual (Last, First, Middle Initial) or	Full Organization Name			
A		Date of Receipt		
Mailing Address		<u> </u>		
City Sta	ate Zip Code			
·	L,F 3333	Amount of Each Receipt this Period		
FEC ID number of contributing				
federal political committee:				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item		
Receipt For:	<u> </u>			
Primary General Aggi	regate Year-to-Date ▼			
Other (specify) ▼				
	\$\$	<u> </u>		
Full Name of Individual (Last, First, Middle Initial) or	Full Organization Name			
B	<del></del>	Date of Receipt		
Mailing Address	•	Mam / Dag / Askadak		
City	ate Zip Code			
Oity	are Zip Oddo	Amount of Each Receipt this Period		
FEC ID number of contribution		Amount of Each Necept this Period		
FEC ID number of contributing federal political committee.				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item		
Receipt For:	<u> </u>	;		
Primary General	regate Year-to-Date ▼			
Other (specify) ▼	Λ Λ. Α	·		
	A	·		
Full Name of Individual (Last, First, Middle Initial) or	Full Organization Name	i		
C		Date of Receipt		
Mailing Address	<u>.</u>	LWAWI 1 LOAD 1 LAAAAAA		
City	ate Zip Code			
5,	2.5 0000	Amount of Each Receipt this Period		
FEC ID number of contributing	<del></del>	Amount of Each Hoosipt this Feriod		
federal political committee.				
		Mome Item		
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item		
Receipt For:		<del>- </del>		
Primary General Agg	regate Year-to-Date ▼			
Other (specify)		• •		
		<b>4</b>		
SUBTOTAL of Receipts This Page (optional)		0.00		
TOTAL This Period (last page this line number only)		0 00		

6 1 7
0
2 3
9
0013
32580

EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	FOR LINE N (check only 21b 28a	
ny information copied from such Reports and State for commercial purposes, other than using the	atements may i	not be sold or use	ed by any perso	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	uditie suid dodi	iess of any politic	ai couimintee to	Solicit contributions from such committee.
This Is A Super PAC				and the second s
Full Name (Last, First, Middle Initial)	<del></del>			· · · · · · · · · · · · · · · · · · ·
			· 	Date of Disbursement
Mailing Address	,			
City	State	Zip Code	,	FEC Identification Number
Purpose of Disbursement	<del></del>			C
Candidate Name		-	Category/	Amount of Each Disbursement this Period
· H - I ,	rsement For:		Туре	
Senate President	Other (spe	☐ General cify) ▼	.	Memo Item
State: District:	· ·	<del></del>		
Full Name (Last, First, Middle Initial)		•		Date of Disbursement
Mailing Address	:	•		) <u>6,00</u> ) <u>1,000</u>
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement	<u>:                                    </u>	.	<del></del>	C
Candidate Name	<u> </u>		Category/	Amount of Each Disbursement this Period
Office Sought: House Disbu	rsement For:		Туре	
Senate President	Primary Other (spe	General		
State: District:				Memo Item
Full Name (Last, First, Middle Initial)		To the second		Date of Disbursement
: Mailing Address		·		Man ( 010 ) Assassa
City	State	Zip Code		Include Instant Beatmentered
Purpose of Disbursement		1:		FEC Identification Number
Candidate Name		* 1	Category/ Type	Amount of Each Disbursement this Period
· • • • • • • • • • • • • • • • • • • •	rsement For:	, , , , , ,		
Senate President	Primary Other (spe	General cify) ▼		Memo Item
State: District:		•		;===

HEDULE C (FEC Form	3X)		<u> </u>
ANS		Use separate schedule(s) for each category of the Detailed Summary Page	
ME OF COMMITTEE (In Full)		Detailed Summary Page.	<u> </u>
	•		e som de de la companya de la compa
This Is A Super PAC			
LOAN SOURCE Full Name (Last,	First, Middle Initial)	Memo Item	Election: Primary General
Mailing Address			Other (specify) ▼
City	State ZIP Co	ode	<u> </u>
Original Amount of Loan	Cumulative Payment To		ce Outstanding at Close of This Peri
Date Incurred  List All Endorsers or Guarantors	Date Due	Interest Rate	Secured:  """ "" "" "" "" "" "" "" "" "" "" ""
1. Full Name (Last, First, Middle In	itial)	Name of Employer	
Mailing Address	-	Occupation	* 128
City	State ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Ir	nitial)	Name of Employer	
Mailing Address		Occupation	in the second se
City	State ZIP Code	Amount Guaranteed Outstanding:	22-A-A-22-A-23-A
3. Full Name (Last, First, Middle In	nitial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding	313
4. Full Name (Last, First, Middle Ir	nitial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
UBTOTALS This Period This Page.	100 to		0 00
		L 1	

	EDULE C-1 (FEC Form 3X) NS AND LINES OF CREDIT FROM LE	ENDING INSTITUTIONS		Supplementary for Information found on
ederal	Election Commission, Washington, D.C. 20463		L	Page of Schedule C
	OF COMMITTEE (In Full)			ENTIFICATION NUMBER
				1
Full Na	NG INSTITUTION (LENDER) ame	Amount of Loan		Interest Rate (APR)
Mailing	Address	Date Incurred or Established	/ M / /	<u> </u>
City	State Zip Code	Date Due	/ <b>W</b>	
A.	Has loan been restructured? No Yes	If yes, date originally incurred	(M-M-/	ĎVĎ / ŸVŸVŸŸ
B.	If line of credit,  Amount of this Draw:	Total Outstanding Balance:		
C.	Are other parties secondarily liable for the debt incur  No Yes (Endorsers and guarantors m	red? nust be reported on Schedule C.)		
D.	Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates o stocks, accounts receivable, cash on deposit, or othe No Yes If yes, specify:	f deposit, chattel papers, or similar traditional collateral?	Does the lende	ue of this collateral?
-	Are any future contributions or future receipts of inter	rest income pladeed as	interest in it?	No Yes
	collateral for the loan? No Yes If yes,		What is the es	timated value?
	A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:	<del></del>	
	Date account established:	Address:		
	, beg / Askersky	City, State, Zip:	· · · · · · · · · · · · · · · · · · ·	<u> </u>
F.	If neither of the types of collateral described above w the loan amount, state the basis upon which this loan	as pledged for this loan, or if the n was made and the basis on wh	amount pledged ich it assures re	does not equal or exceed epayment.
G.	COMMITTEE TREASURER		DATE	
	Typed Name Signature	<del>- `</del>	/	
H.	Attach a signed copy of the loan agreement.		<del></del>	<del></del>
1.	TO BE SIGNED BY THE LENDING INSTITUTION:  I. To the best of this institution's knowledge, the tare accurate as stated above.  II. The loan was made on terms and conditions (is similar extensions of credit to other borrowers of the institution is aware of the requirement that complied with the requirements set forth at 11.	ncluding interest rate) no more far of comparable credit worthiness. t a loan must be made on a basis	vorable at the ti	me than those imposed for
• "	ORIZED REPRESENTATIVE	en e	DATE	
	d Name		- Wash	لمعممهما الممامة
Uigile	A1010	IUO		

SCHEDULE D (FEC Form 3X)			(Use	separate ·	PAGE 1 OF 1	
DEBTS AND OBLIGATIONS	RTS AND OBLIGATIONS		scl	nedule(s)	FOR LINE NUMBER:	
The state of the s		or each bered line)	(check only one) 9			
NAME OF COMMITTEE (In Full)			1		10	
					the state of the state of the state of	
This Is A Super PAC			· · ·			
A. Full Name (Last, First, Middle Initial) of Debto	or or Creditor	11 g - 25		Nature of D	ebt (Purpose):	
Mailing Address		·		·	. • • •	
		•				
City	State	Zip Code		]		
				<u> </u>	<u> </u>	
Outstanding Balance Beginning This Period	•				•	
Amount Incurred This Period	Pa	yment This Period		Outstandi	ng Balance at Close of This Period	
		~ ~ ~ ~				
			·			
B. Full Name (Last, First, Middle Initial) of Debto	r or Creditor	•		Nature of D	ebt (Purpose):	
				; 		
Mailing Address					• •	
City	State	Zip Code		· ·	•	
					•	
Outstanding Balance Beginning This Period			_			
					•	
					en lega de la serie de la companya	
Amount Incurred This Period	Pa	yment This Period		Outstandi	ng Balance at Close of This Period	
C. Full Name (Last, First, Middle Initial) of Debt	or or Creditor			Nature of L	Pebt (Purpose):	
Mailing Address				1		
	101-1-					
City	State	Zip Code				
Outstanding Release Resident This Resident		NOT 10 10 10 10 10 10 10 10 10 10 10 10 10			The second secon	
Outstanding Balance Beginning This Period						
	•			• • •		
Amount Incurred This Period	Pa	syment This Period		Outstandi	ng Balance at Close of This Period	
		<u> </u>				
				5		
**************************************				-		
1) SUBTOTALS This Period This Page (optional)		·····	<b>&gt;</b>		0.00	
2) TOTALS This Period (last page this line numbe	or only)				0 00	
-, TOTALO TINO L'ENOU (last page una une numbe	a Unity)					
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page o	only)	▶		0 00	
<del></del>	<del></del>					
4) ADD 2) and 3) and carry forward to appropriate	e line of Summ	nary Page (last page	only) 🕨		0 00	

Signature

CHEDULE E (FEC Form 3X) MIZED INDEPENDENT EXPENDITUR	RES		PAGE 1 OF 1
27 07 0010 TTEE (In Fall)			FOR LINE 24 OF FORM
ME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER
his Is A Super PAC			C 00607135
ck if 24-hour report 48-hour report	XNew rep		rt filed on
Full Name of Payee	•	. Memo	
· · · · · · · · · · · · · · · · · · ·		·	
Mailing Address			Amount
O.A	State	Zin Codo	
City	State	Zip Code	<u> </u>
Purpose of Expenditure			Date of Disbursement or Obligation
Pulpose of Expenditure		Category/ Type	Man , Load , Laara
Name of Federal Candidate:		Support	Office Sought: House District:
		Oppose	Office Sought: House District:
Calendar Year-To-Date	<del></del>		Disbursement For: Primary Gene
Per Election for Office Sought	<u> </u>		Other (specify)
Full Name of Payee	•	. ☐ Memo	
· .•			
Mailing Address		<del> </del>	- Land Annual Biomer
			Amount
City	State -	Zip Code	
			Date of Disbursement or Obligation
Purpose of Expenditure	na e e e e e	Category/ Type	
Name of Federal Candidate:		Support	Office Sought: House District:
	·	Oppose	President Senate State:
Calendar Year-To-Date			Disbursement For: Primary Gene
Per Election for Office Sought			Other (specify) ▶
			<del></del>
(a) SUBTOTAL of Itemized Independent Expend	ditures		<b>▶</b>
(b) SUBTOTAL of Uniternized Independent Expe	andituras		0 00
D) SUBTOTAL OF ORIGINIZED INDEPENDENT EXPE	anditures		
(c) TOTAL Independent Expenditures		·	0 00
$\chi_{ij}^{+}$ (ii)	·		
	andidate or authorize	ed committee or agent of	not made in cooperation, consultation, or conc of either, or (if the reporting entity is not a politic
Mason	· ·	Det	01 13 2017

## SCHEDULE F (FEC Form 3X)

# ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

I BEHALF OF CANDIDATES I	OR FED	ERAL OFFICE	en jedanske en		PAGE 1	OF 1
(To b	e used only	by Political Comm	ittees in the Gene	ral Election)	FOR LINE 2	5 OF FORM 3
ME OF COMMITTEE (In Full)				"		•
This Is A Super PAC	A Company		· . · · · · · · · · · · · · · · · · · ·			
s your committee been designated to make		Full Name of Subor	rdinate Committee	<del></del>	-	•• (
ordinated expenditures by a political party YES V NO						
YES, name the designating committee:		Mailing Address	·	<del></del> -		<del></del>
		City	<u> </u>	Sta	1 710	' Code
		City		Jia	2"	Code
Full Name (Last, First, Middle Initial) of E	ach Payee	<u> </u>	☐ Memo Item	Purpose of Expe	enditure	
			•		•	- السب
Mailing Address	<del></del>	<del></del>	·			Category Type
	Tours.	17.00		Date		ar ir
City	State	Zip Code		M M /	, , , , , , , , , , , , , , , , , , ,	
Name of Federal Candidate Supported	Office Sough	nt: House	State:	Amount		
		Senate Presidential	District:		<del></del>	<del></del>
Aggregate General Election	<del></del>	- Tresidential		72		1
Expenditure for this Candidate						
Full Name (Last, First, Middle Initial) of I	ach Payee	<del></del>	☐ Memo Item	Purpose of Exp	enditure	
		• •				
Mailing Address					:	Category Type
Maining Address	·			Date		
		Zip Code	The second secon		סיס / אָיָ	i ije iy ay
Name of Federal Candidate Supported	Office Sough		State:	Amount		<del></del>
		Senate Presidential	District:		<del></del>	<del>7 7 7 7</del>
Aggregate General Election			<del></del>		The state of the s	
Expenditure for this Candidate						
Full Name (Last, First, Middle Initial) of I	Each Payee		☐ Memo Item	Purpose of Exp	enditure	1
Mailing Address	<del></del>	<del></del>	<del></del>	<u> </u>		Category Type
	1 05-4-		<del></del>	Date		
City	State	Zip Code		W = W   /	0 0 0 / 2	* * * * * * * * * * * * * * * * * * *
Name of Federal Candidate Supported	Office Soug	ht: House	State:	Amount		<u></u>
	•	Senate Presidential	District:		<del></del>	<del>, , , , , , , , , , , , , , , , , , , </del>
Aggregate General Election	· · · · · ·	Fresidential	· · · · · · · · · · · · · · · · · · ·	<b> </b>	·····	<del></del>
Expenditure for this Candidate		· · · · · · · · · · · · · · · · · · ·				
				-		0 00
UBTOTAL of Expenditures This Page (opt	ional)		<u> </u>		<u> </u>	0 00
OTAL This Period (last page this line num	ber only)					000

## SCHEDULE H1 (FEC Form 3X)

## METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)				
This Is A Super PAC			•	
	USE ONLY ONE	SECTION, A or	r B	
A. Otata and Local	Danta Campuitta			
A. State and Local	•	<b>S</b>		
Fixed Percentage (s	select one)			· .
Presidential-0	Only Election Year (28%	Federal)		
Presidential	and Senate Election Year	(36% Federal)	a far in	
Senate-Only	Election Year (21% Fede	eral)	en de la companya de	
Non-Presider	ntial and Non-Senate Elec	ction Year (15% Feder	ral)	
B. Separate Segreg	•	Nonconnected	Committees	
į				
Federal	No. 1 Company of the		<b></b> %	
Nonfederal			%	
This ratio applies to	(check all that apply):			
Administrative	Generic Voter Drive	Public Commu	unications Referencing	Party Only
·			Andrew Market (1997) Andrew Market (1997) Andrew Market (1997)	
Section 1	and the second section of the section o	e garage	en en session de la creation de la c	

IAME OF COMMITTEE (In Full) This Is A Super PAC  IATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT  (CTIVITIES APPEARING ON THIS REPORT.  Interviols of allocation:  I. FUNDRAISING activities are allocated using the "unds received method" where the federal proportion of expenses must equal the federal proportion of mornies raised.  II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the loderal proportion of discovery and the following proportion of discovery and the loderal proportion of expenses and located and nonfederal candidates support includes public communications or voter drives that teller to both federal and nonfederal candidates of whether there is a reference to a political party. Such expenses are allocated using a time/space method.  ACTIVITY OF EVENT IDENTIFIER  ACTIVITY IS:    FEDERAL %   NONFEDERAL	CHEDULE H2 (FEC Form 3X)	*			PAGE 1 OF 1
This Is A Super PAC  ATIOS FOR ALLOCABLE PUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT  CITVITIES APPEARING ON THIS REPORT.  It PUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.  II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. For PACS only: Direct candidates support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.  ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:    FEDERAL %   NONFEDERAL	LLOCATION RATIOS				1 1 1
CTIVITIES APPEARING ON THIS REPORT.  shods of allocation:  I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.  II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. For PACs Only: Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.  ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:    Fundraising		<u>.</u>		e e e e	
athods of allocation:  I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.  II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the federal proportion of disbussments is absed on the benefit derived by federal candidates from the activity. For PACs Only: Direct candidate support includes public communications or voter drives that refer to bolf federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.  ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:    Fundraising   Direct Candidate Support	CTIVITIES APPEARING ON THIS REPORT		E SUPPOR	r	A the way to Attack d
expenses must equal the federal proportion of monies raised.  II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. For PACS Only: Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.  ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:    Fundraising   Direct Candidate Support	• *	• • •			
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:    Fundraising	expenses must equal the federal proportion of monies raise.  II. Shared DIRECT CANDIDATE SUPPORT activities are allowhere the federal proportion of disbursements is based on tivity. For PACs Only: Direct candidate support includes prefederal and nonfederal candidates, regardless of whether the	ed. cated accord the benefit ublic commu	ding to bene derived by unications or	efit expected federal candi r voter drives	to be derived, dates from the ac- that refer to both
Fundraising   Direct Candidate Support	<del></del>		FEDE	RAL %	NONFEDERAL %
ACTIVITY IS:	Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	eported		%	9
ACTIVITY IS:	ACTIVITY OR EVENT IDENTIFIER		<u>.                                    </u>		
ACTIVITY IS:     Fundraising	Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	eported	FEDER		NONFEDERAL %
ACTIVITY IS:     Fundraising    Direct Candidate Support CHECK IF THE RATIO IS:     New    Revised    Same as Previously Reported  ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:     Fundraising    Direct Candidate Support CHECK IF THE RATIO IS:     New    Revised    Same as Previously Reported  ACTIVITY OR EVENT IDENTIFIER  ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:     Fundraising    Direct Candidate Support CHECK IF THE RATIO IS:     Fundraising    Direct Candidate Support CHECK IF THE RATIO IS:     New    Revised    Same as Previously Reported  ACTIVITY OR EVENT IDENTIFIER  ACTIVITY OR EVENT IDENTIFIER  FEDERAL %  NONFEDERAL  FEDERAL %  NONFEDERAL  NONFEDERAL	ACTIVITY OR EVENT IDENTIFIER				NONECCENT
ACTIVITY IS:    Fundraising	Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	eported	FEDER	<del></del>	NONFEDERAL %
ACTIVITY IS:    Fundraising	ACTIVITY OR EVENT IDENTIFIER		FEDE	RAI %	NONEEDERAL %
ACTIVITY IS:  Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported  ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS:  FEDERAL % NONFEDERAL % NONFEDERAL	Fundraising Direct Candidate Support  CHECK IF THE RATIO IS:	eported			
Fundraising Direct Candidate Support  CHECK IF THE RATIO IS:  New Revised Same as Previously Reported  ACTIVITY OR EVENT IDENTIFIER  FEDERAL % NONFEDERAL	ACTIVITY OR EVENT IDENTIFIER		FEDE	RAL %	NONFEDERAL %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:  FEDERAL % NONFEDERAL	Fundraising Direct Candidate Support  CHECK IF THE RATIO IS:	eported			
			FEDE!		NONFEDERAL %
CHECK IF THE RATIO IS:	Fundraising Direct Candidate Support			<b></b> %	

# SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

-:	PAGI	1	0	F.	1	
	FOR	LIÑE	18a	OF	FORM	3

IAME OF COMMITTEE (In Full)		
i de la companya de	e valoritation de la company de la compa La company de la company d	
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
	LMANA / LOAGA / LANAMA	
BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative		
	•	
il) Generic Voter Drive	·	
iii) Exempt Activities		
iv) Direct Fundraising (List Activity or Event Id	entifier)	·
a)		1
	- 1	l i
b)		
		<del> </del>
c) Total Amount Transferred For Direct Fund	raising	<u> </u>
v) Direct Candidate Support (List Activity or E	Event Identifier)	36 - 436 - 1
a) 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1		
		1
. b)		
c) Total Amount Transferred For Direct Cand	lidate Support	
	.,	
vi) Public Communications Referring Only to	Party (Made by PAC)	
. TOTALS F	OR BREAKDOWN OF TRANSFER RECEIVE	D
<u></u>	e Carlos de la	
TOTAL This Period (Administrative)		0 00
TOTAL This Period (Generic Voter Drive)		0 00
TOTAL This Period (Exempt Activities)		0 00
TOTAL This Period (Direct Fundraising)		0.00
TOTAL This Period (Direct Candidate Support)		0 00
TOTAL This Period (Direct Candidate Support)		
TOTAL This Period (Public Communications Referring	g Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)		0.00

# 2017 - 01 - 2M - 0M - 001M2589

## SCHEDULE H4 (FEC Form 3X)

# DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

1	PAGE	1	0	F	1	
•	FOR	LINE	21a	OF	FORM	3)

	ME OF COMMITTEE (In Full)			••	
1	his Is A Super PAC	•••	-		
۹.	Full Name (Last, First, Middle Initial)	•		☐ Memo Item	Allocated Activity or Event:  Administrative Fundraising Exempt
	Mailing Address				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:				Allocated Activity or Event Year-To-Date
	Activity or Event Identifier:			Category/ Type	Date Mam / Bab / Varanta
	FEDERAL SHARE	+	NONFEDERAL		= TOTAL AMOUNT
			2 2 2 2		
		<u> </u>			Allocated Activity or Event:
В.	Full Name (Last, First, Middle Initial)		· <u> </u>	☐ Memo Item	Administrative Fundraising Exempt
	Mailing Address				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:			لمما	Allocated Activity or Event Year-To-Date
	Activity or Event Identifier:			Category/	
	<u> </u>			Type	Date
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	Luzuauau				
C.	Full Name (Last, First, Middle Initial)			☐ Memo Item	Allocated Activity or Event:  Administrative Fundraising Exempt
	Mailing Address		····		Voter Drive Direct Candidate Support
	City	State	Zip Code	-	Public Comm (ref to party only) by PAC
	Purpose of Disbursement:				Allocated Activity or Event Year-To-Date
	Activity or Event Identifier:		-5	Category/	Purpus , person , provinces
				Type	Date
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	JBTOTAL of Allocated Federal and NonFederal	Activity Thi	s Page		
٠,	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	0_00		· · · · · · · · · · · · · · · · · · ·	0 00	0, 00
T	OTAL This Period (last page for each line only)( FEDERAL SHARE	Federal sha	are to 21(a)(i) and NONFEDERAL		are to 21(a)(ii))  TOTAL AMOUNT
	0_00			0 00	0 00
		_=			

## SCHEDULE H5 (FEC Form 3X)

## TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

o be used by State, District and Local Party Committees Only)	PAGE 1 OF 1 FOR LINE 18b OF FORM 3
IAME OF COMMITTEE (In Full)	
This Is A Super PAC	
NAME OF ACCOUNT DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
BREAKDOWN OF THIS TRANSFER	
i) Voter Registration VOTER REG	ISTRATION .
Total Amount Transferred for Voter Registration	o <u> </u>
li) Voter ID	VOTER ID
Total Amount Transferred for Voter ID	
	GOTV
iii) GOTV · Total Amount Transferred for GOTV	
	GENERIC CAMPAIGN ACTIVITY
iv) Generic Campaign Activity	GENERIC CAMPAIGN ACTIVITY
Total Amount Transferred for Generic Campaign Activity	
NAME OF ACCOUNT DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NAME OF ACCOUNT	TOTAL AMOUNT TRANSPERRED
حصما لسا لسا	
BREAKDOWN OF THIS TRANSFER	
i) Voter Registration	ISTRATION
Total Amount Transferred for Voter Registration	
	VOTER ID
II) Voter ID	
Total Amount Transferred for Voter ID	
iii) GOTV	GOTV
Total Amount Transferred for GOTV	
, iv) Generic Campaign Activity	GENERIC CAMPAIGN ACTIVITY
Total Amount Transferred for Generic Campaign Activity	
TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	D (Last Page Only)
TOTAL This Period (Voter Registration)	0 00
TOTAL This Period (Voter ID)	0 00
en e	
TOTAL This Period (GOTV)	0 00
TOTAL This Period (Generic Campaign Activity)	0_00
en e	
TOTAL This Period (Total Amount of Transfers Received)	0 00

# SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE 1 OF 1
FOR LINE 30a OF FORM 3X

NAME OF COMMITTEE (In Full)				
This Is A Super PAC				
A. Full Name (Last, First, Middle Initia	l) / Full Orga	nization Name	☐ Memo Item	Type of Allocated Activity or Event:  Voter Registration GOTV  Voter ID Generic Campaign
Mailing Address		<del></del>	<u> </u>	Allocated Activity or Event Year-To-Date
City	State	Zip Code		
Purpose of Disbursement	· ,		Category/ Type	Date Date
FEDERAL SHARE	+	LEVIN	SHARE	= TOTAL AMOUNT
		<u> </u>	77	
B. Full Name (Last, First, Middle Initia	l) / Full Orga	anization Name	☐ Memo Item	Type of Allocated Activity or Event:  Voter Registration GOTV  Voter ID Generic Campaign
Mailing Address			<u> </u>	Allocated Activity or Event Year-To-Date
City	State	Zip Code		
Purpose of Disbursement	<u></u>	J(* -	Category/ Type	Date Date
FEDERAL SHARE	+	∴ LEVIN	SHARE	= TOTAL AMOUNT
			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
C. Full Name (Last, First, Middle Initia	ul) / Full Orga	anization Name	☐ Memo Item	Type of Allocated Activity or Event:  Voter Registration GOTV  Voter ID Generic Campaign
Mailing Address				Allocated Activity or Event Year-To-Date
City	State	∂, Zip Code		
Purpose of Disbursement	<del>-1</del>	N 0	Category/ Type	Date / Date
FEDERAL SHARE	+	LEVIN	SHARE	= TOTAL AMOUNT
SUBTOTAL of Shared Federal and Levir	Activity This	. •		
FEDERAL SHARE	~ †	LEVIN	SHARE 0 00	TOTAL AMOUNT  0 00
TOTAL This Period (last page for each li	ne only)(Fed	eral share to 30(a)(i)		30(a)(ii))
FEDERAL SHARE	00	1 E\/IN	SHARE	TOTAL AMOUNT 0 00
TOTAL This Period for the Levin Share	. [	LEVIN	0_00	
				FEC Schedule H6 (Form 3X) Rev. 05/2016

# SCHEDULE L (FEC Form 3X) AGGREGATION PAGE: LEVIN FUNDS

NAM	OF COMMITTEE (In Full)	The solution of the solution o	· · · · · · · · · · · · · · · · · · ·
	s Is A Super PAC		
NAMI	E OF ACCOUNT		
		COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1.	RECEIPTS FROM PERSONS (a) Itemized(Use Schedule L-A)	000	0 00
	(b) Unitemized	0_00	0 00
	(c) Total	0_00	0 00
2.	OTHER RECEIPTS	0_00	0_00
3.	TOTAL RECEIPTS	0_00	0 00
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-8)		
	(a) Voter Registration	0 00	000
	(b) Voter ID	0 00	0_00
•	(c) GOTV	0_00	0_00
	(d) Generic Campaign	0 00	0_00
:	(e) Total	0_00	0_00
5.	OTHER DISBURSEMENTS	0 00	0.00
6.	TOTAL DISBURSEMENTS(Add Lines 4e and 5)	0_00	0_00
. <b>7</b> .	BEGINNING CASH ON HAND(for Column B, use cash as of January 1st)	0.00	0.00
8.	RECEIPTS(from Line 3)	0_00	0_00
9.	SUBTOTAL (Add Lines 7 and 8)	0_00	0 00
10.	DISBURSEMENTS	0_00	0 00
11.	ENDING CASH ON HAND(Subtract Line 10 From Line 9)	0_00	0.00

Occupation (for Individual)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

## SCHEDULE L-A (FEC Form 3X) ITEMIZED RECEIPTS OF LEVIN FUNDS

PAGE 1 Use separate schedule(s) for each category of the FOR LINE NUMBER: Aggregation Page (check only one) Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) This Is A Super PAC 104 1000 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Memo Item Date of Receipt Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer (for Individual) Aggregate Year-to-Date Occupation (for Individual) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name 

Memo Item Date of Receipt В. Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer (for Individual) Aggregate Year-to-Date Occupation (for Individual) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name 🗌 Memo Item Date of Receipt Mailing Address Amount of Each Receipt this Period Zip Code City State Name of Employer (for Individual) Aggregate Year-to-Date Occupation (for Individual) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name 

Memo Item Date of Receipt D. Mailing Address Amount of Each Receipt this Period. City State Zip Code Name of Employer (for Individual) Aggregate Year-to-Date

0 00

CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS F LEVIN FUNDS		Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 1 OF 1 (check only one) 4a 4c 5
ny information copied from such Reports and Stater for commercial purposes, other than using the national NAME OF COMMITTEE (In Full)	ements may r ame-and addr	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
This Is A Super PAC		M	
Full Name (Last, First, Middle Initial) / Full Organ	nization Name	Memo Item	Date of Disbursement
Mailing Address			
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement			
Full Name (Last, First, Middle Initial) / Full Organization Name			Date of Disbursement
Mailing Address			
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement			
Full Name (Last, First, Middle Initial) / Full Organization Name			Date of Disbursement
Mailing Address	100	7 / 1 / 1 / 1 / 2 / 2 / 2 / 2 / 1 / 2 / 1 / 2 / 1 / 2 / 1 / 2 / 2	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement	•	1	
Full Name (Last, First, Middle Initial) / Full Organization Name			Date of Disbursement
Mailing Address			لـــالـا
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement	:		
Full Name (Last, First, Middle Initial) / Full Organization Name			Date of Disbursement
Mailing Address			
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement	4	**********	
SUBTOTAL of Disbursements This Page (optional	)	<b>→</b>	0,00
TOTAL This Period (last page this line number or	ıly)		000

Washing ton, DC 20463 FEC 34 NW

RECEIVED FEC MAIL CENTER

2017 JAN 23

AM 7: 32

# Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.

The FEC added this page to the end of this f	lling to indicate now it was received.
Hand Delivered	Date of Receipt
Postmarked	Date of Receipt
USPS First Class Mail 0/-/7-20	7 01-23-2017
USPS Registered/Certified	Postmarked (R/Ć)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery
Received from House Records & Registrat	Date of Receipt tion Office
Received from Senate Public Records Offi	Date of Receipt ce
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
Bev S	01-23-2017
PREPARER	DATE PREPARED

(3/2015)